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REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to: Commissioner for Patents Box RCE Washington, DC 20231

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Application Number	09/771,416	Ye	ار
Filing Date	January 26, 2001	po	4
First Named Inventor	Daniel PELLERIN		L
Art Unit	3728	671	
Examiner Name	J. Mohandesi	5 16	
Attorney Docket Number	13493		ح

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application
Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

Submission required under 37 C	FR §1.114	D -		
a. <a> Previously submitted		PRECEIVED MAY 1 6 2003 of previously fleet apply 2		
i. Consider the amendment(s)/reply	under 37 CFR §1.116 previously file	ed on		
(Any unentered amendment(s) ref	erred to above will be entered).	MAY 1 6 2002		
ii. Consider the amendment(s)/reply under 37 CFR §1.116 previously filled on (Any unentered amendment(s) referred to above will be entered). iii. Consider the arguments in the Appeal Brief or Reply Brief previously filed in OLOGY CENTER R3700 b. Enclosed				
iii. 🗆 Other		CENTER DE		
b. ☐ Enclosed	· · · · · · · · · · · · · · · · · · ·	-17 H3700		
i. □ Amendment/Reply ii. □ Affidavit(s)/Declaration(s		sclosure Statement (IDS)		
- Andavida/Deciaration(3) IV. U Other			
2. Miscellaneous				
		requested under 37 CFR §1.103(c) for		
a period of months (Period b. Other	of suspension shall not exceed 3 mg	onths; Fee under 37 CFR§1.17(i) required)		
3. Fees The RCE fee under 37 CFR §1.	17(a) is required by 37 CED 81 114	when the BCE is filed		
a. The Director is hereby authoriz				
Deposit Account No. 19-20	-	oo, or oroun arry overpaymonts, to		
i. RCE fee required under		715/2003 MAHHED1 00000017 09771416		
ii. Extension of time fee (37)	CFR §§1.136 and 1.17)	FC:1801 750.00 OP		
iii. 🔲 Other		750.00 dP		
b.				
C. Payment by credit card (Form PTO-2038 enclosed) WARNING: Information on this form may become public. Credit card information should not				
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To moraded on this form. Trove	ad diddit dara imormation and	3 addition2ation on 1 10-2030.		
SIGNATURE O	F APPLICANT, ATTORNEY, O	R AGENT REQUIRED		
Name (Print / Type) Jeffray G. Sheldon	· F	Registration No. (Attorney / Agent) 27,953		
Signature Van Juli	N-	Date 5/7/Loo3		
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